



North Carolina Department of Environment and Natural Resources
Division of Waste Management
Solid Waste Section



V15704
INVOICE 2013

Make checks payable to **N.C. Division of Waste Management, Solid Waste Section**, include Permit Number and invoice number on check. If you are paying by electronic transfer, include the invoice number with your electronic transfer. [G.S. 25-3-506: A \$25.00 processing fee will be charged on all returned checks.] Please return a copy of this invoice with your payment.

Contact/Billing Information:	Facility Location Address:
Mr. Chris Stahl, Solid Waste Director Macon County 109 Sierra Drive Franklin, NC 28734	Highlands Transfer Station 109 Sierra Drive Franklin, NC 28734

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW013-0001	1-8-2013		\$3,000.00

A. **Permit Fee Requirements:** Pursuant to North Carolina General Statute 130A-295.8 you are required to pay fee(s) based on your solid waste management activities. The fee(s) shall be used to support the solid waste management program. An application is deemed incomplete until all fees are received.

B. **Explanation of Invoice Amount is Based on Facility's Current Permit Application**

Facility Permit #	Facility Type	Application Type	Application Date	Fee	Total Amount
5704T-TRANSFER-2008	TRANSFER	Amendment (5 Year Renewal)	12/18/2012	\$3,000.00	\$3,000.00
Total Amount Due					\$3,000.00
Amount Paid					\$0.00

C. **Remit Payment (including a copy of this invoice) To:**

Division of Waste Management
Solid Waste Section
1646 Mail Service Center
Raleigh, NC 27699-1646
Attn: Ellen Lorscheider

60-4712-580600

D. **Solid Waste Contacts:**

- Questions about billing process: Liz Patterson at (919) 707-8286 or Ellen Lorscheider at (919) 707-8245
- Questions about the Regulations and Technical Assistance:
Ed Mussler (919) 707-8281 Landfills, Transfer Stations
Michael Scott (919) 707-8246 Land Application Sites, Compost Facilities

PAID
CK#00716219
\$3,000.00

E. **Update Your Information:** Please indicate any changes in Facility or Contact Information.

1/14/13
D. Casada

PERMIT APPLICATION REVIEW FORM

Review Requested by: Allen Gaither	Date Requested: 12/19/2012
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Facility Name and Permit ID	Highlands Transfer Station, 5704T-TRANSFER-2008
Applicant (Owner) Name	Macon County
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input type="checkbox"/> (1)a. New – New Facility <input type="checkbox"/> (1)b. New – Expand Facility Boundary <input type="checkbox"/> (1)c. New – Expand Waste Boundary <input type="checkbox"/> (1)d. New – Substantial Amendment <input type="checkbox"/> (2)a. Amendment – Next Phase of the Approved Facility Plan <input checked="" type="checkbox"/> (2)b. Amendment – Five-year Renewal <input type="checkbox"/> (2)c. Amendment – Change in Ownership <input type="checkbox"/> (3)a. Modification – Change to Approved Plans (No CHR) <input type="checkbox"/> (3)b. Modification – Subsequent Permit to Operate (No CHR)
Permit Fee	\$3000
Date Application Received	12/18/2012
Contact Name, Title & Phone No.	Mr. Chris Stahl, Solid Waste Director, (828) 349-2100
Contact Email Address	cstahl@maconnc.org
Company Name	Macon County
911 Address	109 Sierra Drive
Mailing Address	Same as above
City/State/Zip	Franklin, NC 28734
Parent Company	N/A
Known Subsidiaries	N/A
Other Known Related or Associated Business Names	N/A
Known Counties of Operation	Macon
Does the Applicant have a Past Or Current Solid Waste Permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Facility Type: MSW,C&D, Trans Permit No.: 57-01,02,03,04
Did the Permit Applicant Submit Financial Assurance Cost Estimates?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Not Needed <input checked="" type="checkbox"/>
Other Notes	Enter Other Notes